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**Department of Revenue**

TREASURY DIVISION

CASH MANAGEMENT

PO Box 110406

Juneau, Alaska 99811-0406

**Main:** 907.465.2360

**Fax:** 907.465.4397

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| **DEPOSITORY SUBACCOUNT REQUEST** | |
| **Title**:       **(*DMV Only*) FEIN:** | |
| **City/Town Location:** | |
| *(For Treasury use only)*  *Subaccount #: Date Added to Subaccount List:* | |
| **Department:** | **Physical Address:** |
| **Division:** |  |
| **Mailing Address:** |  |
| **City:** **AK Zip Code:** | **City:       AK Zip Code:** |

1. Provide a brief description of the types of payments (cash or checks) that will be deposited to this subaccount and provide an estimated dollar amount being deposited each week *(Attach extra sheets if necessary)*.
2. Will there be cash and coin deposited? Yes  No
3. Select the bank to which deposits will be delivered. If choosing Wells Fargo or First National, please provide a brief justification.

Key Bank (**Primary**)  Wells Fargo  First National Bank Alaska  **BEACHES/ACH Transfer**

1. Will this account use Remote Deposit Capture (RDC)? *Please see AAM 50.140* Yes  No

If yes, please provide the list of names that need access to RDC *(Attach extra sheets if necessary)*:

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| --- | --- | --- |
| **Name** | **Email Address** | **Phone Number** |
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1. If you would like to request direct coding for this subaccount please download and complete a Direct Coding Template Spreadsheet from the ‘Forms’ section of the Cash Management website and submit it with this application. <http://treasury.dor.alaska.gov/Cash-Management/Forms>
2. Please provide the contact information for the person who is responsible to receive and process NSF items, foreign currency adjustments, and other bank adjustments related to this subaccount.

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| --- |
| **NSF Contact Name:** **Phone:** |
| **Email:** |

**Subaccount Requestor:       Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| *All Deposits to this sub account will comply with cash control procedures as stated in the Alaska Administrative Manual, section AAM 50 – Cash*  **Approved by Dept Finance Officer:       Date: ­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |